IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: William Marcial, et al.

Art Unit: 3627

Serial No.: 09/747,908

Examiner: Gerald J. O'Connor

Filed: December 22, 2000

:

For:

ACCOUNT RECONCILIATION

METHODS AND SYSTEMS

Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

TRANSMITTAL

1. Transmitted herewith is: Transmittal (3 pages); Amendment in response to Office Action dated April 4, 2007, and made final (33 pages)

STATUS

2. Applicant claims small entity status. is other than a small entity.

EXTENSION OF TERM

3.	The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.											
	(a)	\boxtimes	(complete (a) or (b), as applicable) Applicant petitions for an extension of time under 37 C.F.R. 1.136 (Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)									
Exte	ension f	or resp	onse w	ithin:	(Other than small entity Fee	Small entity Fee (if applicable)					
first month						120.00	\$ 60.00					
				second month	\$	450.00	\$ 225.00					
third month						1,020.00	\$ 510.00					
fourth month						1,590.00	\$ 795.00					
fifth month						2,160.00	\$1,080.00					
						Fee Due	\$ 1,020.00					
If an additional extension of time is required, please consider this a petition therefor. (Check and complete the next item, if applicable)												
An extension of <u>two</u> months has already been secured. The fee paid therefor \$450.00 is deducted from the total fee due for the total months of extension now requested.												
	Extension fee due with this request § 570.00											
	(b) Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.											

FEE FOR CLAIMS

4.	The fee	for cla	lms (37)	J.F.R. 1.16(b)-(a)) nas t	seen calculated as s	nown				
	(Co	ol. 1)		(Col. 2)	(Col. 3)	SMALL ENTITY		OTHER THAN SMALL ENTITY			
	REMA AF	AIMS AINING TER DMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	ADDITIONAL. RATE FEE	OR	ADDITIONAL RATE FEE			
	Auviery	DIVILIVI	MINUS	7,110101	=	x \$25.00 = \$		x \$50.00 = \$			
TOTAL INDEP.			MINUS		=	x \$100.00 = \$		x \$200.00 = \$			
	FIRST	r PRESEN	TATION OF	MULTIPLE DEP. (CLAIM	+ \$180.00 = \$		+ \$360.00 = \$			
						TOTAL ADDITIONAL FEE \$	OR	TOTAL ADDITIONA FEE \$			
	(a)	\boxtimes	No add	itional fee fo	r Claims is	required					
					OR						
	(b)		Total a	dditional fee	for claims	required \$					
				FEE :	PAYMEN	Т					
5.	Attached is a check in the sum of \$										
				t Account No this transmit		the sum of \$570.00 ned.	<u>).</u>				
				FEE D	EFICIEN	CY					
6.	6. If any additional extension and/or fee is required, charge Deposit Account 1 01-2384.										
				A	ND/OR						
		If any 2384.	addition	al fee for clai	ims is requ	ired, charge Deposi	it Acc	ount No. 01-			
7.		Other	:								
					Reg AR On St.	niel M. Fitzgerald g. No. 38,880 MSTRONG TEAS e Metropolitan Squ. Louis, MO 63102 1/621-5070					